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To: Examiner Kennedy Schaetzle**From:** Steven L. Nichols**Fax:** (571) 273-8300**Pages:** 21 pages including coversheet**Phone:****Date:** April 24, 2006**Re:** Amendment - 10/057,116

☒ **Urgent** ☒ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

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1. Facsimile Coversheet (1 page)
2. Certificate of Transmission (1 page)
3. Transmittal Letter for Response/Amendment with Duplicate Copy (2 pages)
4. Petition for Extension of Time Under CFR 1.136(a) (1 page)
5. Amendment (16 pages)


Application No.: 10/057,116

Attorney Docket No.: AB-165U

Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to Examiner Kennedy Schaetzle via the USPTO central facsimile number, (571) 273-8300.

on April 24, 2006
Date


Signature

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Typed or printed name of person signing Certificate

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AB-165U

Serial No.: 10/057,116

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Patent Application: Todd K. Whitehurst et al.

Confirmation No.: 1864

Application No.: 10/057,116

Examiner: SCHAEZLE, Kennedy

Filed: January 24, 2002

Group Art Unit: 3762

Title: "Fully Implantable Neurostimulator for Peripheral
Nerve Stimulation as a Therapy for Chronic Pain"**APR 24 2006**Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

☒ Response/Amendment☒ Petition to extend time to respond☒ New fee as calculated below☐ Supplemental Declaration☐ No additional fee☐ Other: _____

CLAIMS AS AMENDED BY A LARGE ENTITY						
FOR	CLAIMS REMAINING AFTER AMENDMENT	NUMBER EXTRA	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	21	MINUS	26	= 0	X \$50.00	\$0.00
INDEP. CLAIMS	4	MINUS	4	= 0	X \$200.00	\$0.00
<input type="checkbox"/> FIRST PRESENTATION OF A MULTIPLE DEPENDANT CLAIM					+ \$360.00	\$
EXTENSION FEE	<input checked="" type="checkbox"/> 1ST MONTH \$120.00	<input type="checkbox"/> 2ND MONTH \$450.00	<input type="checkbox"/> 3RD MONTH \$1020.00	<input type="checkbox"/> 4TH MONTH \$1590.00		\$120.00
OTHER FEES						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$120.00

Please charge \$120.00 to Deposit Account 18-0013/40328-0030. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 18-0013/40328-0030 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 18-0013/40328-0030 under 37 CFR 1.16, 1.17, 1.19, 1.20 and 1.21. A duplicate of this sheet is enclosed.

I hereby certify that this correspondence is being transmitted to the US Patent and Trademark Office via facsimile number (571) 273-8300 on April 24, 2006

Number of pages transmitted: 22Signature: 
Rebecca R. Schow

Respectfully submitted,

By: 

Steven L. Nichols (Reg. No.: 40,326)
Attorney/Agent for Applicant(s)
Telephone No.: (801) 572-8066
Date: April 24, 2006